

Inside OUT

The Newsletter of the CDC Corrections Demonstration Projects
*Produced six times a year through the collaboration of Correctional Technical Assistance
and Training Project of SEATEC and National Minority AIDS Council*

Volume 1, Issue 1

October 2000



...Notes from CDC and HRSA

Congratulations again on being selected to do a very special and unique program! It is almost a year into the project and we have some rather exciting accomplishments.

All sites have begun implementation and have gotten contracts out to external providers. We have worked long and hard to develop user-friendly instrument tools that collect not only site-specific data but also data for the cross-site evaluation. Two site visits to each state have occurred; these visits were each remarkable in their own way, reflecting the different nuances that each site offers to the overall project.

Also, the three grantee meetings have provided individuals with the opportunity to meet each other, network and learn from each other. Overall, the CDC/HRSA Corrections Demonstration Project has congealed and become an integrated yet independent team. Thank you to you all for your hard work!

Just a few reminders...

→The Steering Committee calls are now monthly at 3:00 PM on the third Monday of every month.

→The next Grantee meeting is tentatively scheduled for January 17-19, 2001 in San Francisco, California. As soon as these dates are confirmed, the information will be passed on to you.

→The August/September 2000 issue of HRSA Care ACTION newsletter features an article on incarcerated people and HIV/AIDS. For copies of the issue, comments and questions call: 1-888-ASK-HRSA or 1-888-275-4772

- Karina Krane

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This Month...

- ❖ Tracking Technical Assistance
- ❖ CBO Spotlight: Wholistic Stress Control Institute
- ❖ State Report: New York
- ❖ Professional Corner: Dan O'Connell
- ❖ News from NMAC
- ❖ Evaluation and Program Support Center: Emory University and Abt Associates
- ❖ Technical Assistance Update from CTAT
- ❖ Save the Date
- ❖ Resources

Inside **OUT**

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and

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Technical Assistance...

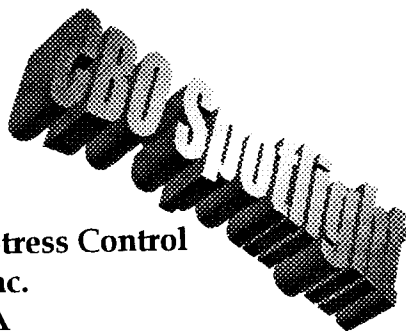
CTAT has been training case managers who work on both sides of the wall in several participating states. Most recently, in Trenton, NJ, Vara Deloney organized a comprehensive two-day training that provided the case managers with an introduction to corrections. The training started with a presentation on how people get into jail and prison, walking the attendees through the process of arrest, adjudication and release. Vara fielded questions about probation, parole, maxing out and split sentences. The curriculum went on to cover the details of medical services in corrections including sick call, emergency services, medication delivery and medical records. The case managers received an overview of the 'culture of corrections' from Ellen Bentz, of NMAC, who provided the CBOs with some tips for overcoming barriers when initiating their programs in the correctional facilities. Afternoon topics focused on educational resources, community resources and a case study to put new skills to work.

The second day of training expanded the focus of the group to look at the problem of HIV counseling in corrections, with a guest appearance by Bill Hight, Ph.D. This day zeroed in on risk reduction and pre and post-test counseling. The case managers had the opportunity to learn how to integrate new skills into practice at the end of the day. The initial feedback on the training was positive, with participants thanking Vara and mentioning the words every trainer wants to hear, "I learned something today."

SEATEC has more trainings for case managers scheduled for Chicago on October 10 and 11, Massachusetts on October 30 and Florida on October 31. Trainings for California, Georgia, and New York are also in the process.

Meanwhile, NMAC is focusing on the needs of individuals CBOs. The predominant common themes in site visits with CBOs are the need for clarification of the Demonstration Project goals and objectives, the need for housing resources and the desire for more communication between the case managers at the various collaborating CBOs. Ellen Bentz is working on several projects to improve the prospects of the CBOs' ability to interface with each other. A schedule for CBO conference calls is in the planning phase.

Also in development is a project to film two support groups of ex-offenders from Massachusetts, one in English, the other in Spanish. The films will be used to educate current inmates on the importance of planning for the challenges of release through the real experiences of ex-offenders who have lived through rocky initial readjustment periods. If all goes well, we hope to see these videos submitted by the CBOs to the American Correctional Association's film festival at next year's conference.



**Wholistic Stress Control
Institute, Inc.
Atlanta, GA**

The Wholistic Stress Control Institute formed in the response to the tragic Missing and Murdered Children Crisis that occurred in Atlanta in the early 1980s. The original program was a three-year intervention that focused on stress reduction in community schools. The program was a rousing success, with positive effects ranging from decreased suspension and fighting to increased academic performance, coping skills and stress management.

From this initial model, the Wholistic Stress Control Institute has continued to grow in size, budget and focus. They now have a staff of 22 and 13 programs targeting audiences starting as young as pre-school to incarcerated adults. The programs have expanded to include HIV and STD testing and education, Tai Chi and peer educators. Throughout this growth, the Wholistic Stress Control Institute has maintained the philosophy of Jennie Trotter, the founder and executive director: teaching individuals the skills needed to cope with stress they face daily is the first step to assisting them to succeed in life's challenges.

This is the theory behind the HIV/AIDS educational programs that the Institute offers in the juvenile and adult detention facilities in the Atlanta area. Kim Bernard, the project manager for correctional programs and the contact person for the Institute's involvement in the CDC Demonstration Project, uses

the stress reduction model for her groups with women, men and juveniles.

The Wholistic Stress Control Institute's role in the Demonstration Project centers on juveniles with STD/HIV/AIDS. Adjudicated juveniles will be offered the option to participate in a voluntary 8-week intervention program that focuses on stress management, STD/HIV/AIDS education and life skills. The offer to participate will be extended at the courthouse by probation officers. The youth that consent to participate will be placed in either the intervention or control groups; those that receive the intervention will meet once a week in a group setting, those in the control group will receive no special intervention.

Kim says the biggest obstacles that her program faces involve consistency in the number of people attending her sessions and the ongoing need for materials that keep the participants stimulated and involved. Both Kim and her colleagues feel that more staff training for correctional officers and more systemic support by the correctional system would allow their programs to reach maximum efficacy.

Kim's greatest wish for her project? More programs for family members and visitors.

For more information about the Wholistic Stress Control Institute's intervention in the juvenile criminal justice system in Atlanta, contact:

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State Report: New York

Interviewees: Dan O'Connell, Project Director, CDC/HRSA Corrections Demonstration Project; Barbara Devore, Director, Community Based Services, NYSDOH-AL; April Richardson-Moore, Health Program Administrator II, Bureau of Direct Program Operations, NYSDOH-AL

The CDC/HRSA Project in New York State is almost fully implemented. Dan O'Connell, Project Director, credits this to a trained staff that was, in large part, already in place and fully committed to the goals of the project. Additionally, the project design was based on well-established, functioning programs, and it sought to enhance and expand those existing programs in collaboration with numerous community and governmental partners.

Providing services to the New York corrections population is an enormous challenge. Included in this complicated population are increasing numbers of adolescents, monolingual clients and women. Recognizing this complexity, the New York Program uses diverse approaches and a model that can be adapted to meet a variety of needs. According to Dan, the funding from CDC/HRSA has allowed the existing program to "go to the next step" in meeting those needs.

For example, the grant has supported the expansion of services to a younger population. Existing programs focused on HIV testing, prevention, and counseling with adolescent offenders but the additional funding provided an opportunity to work with the Office of Children and Family Services to provide more services. As part of the grant, all adolescents are given STD screening prior to being sent to detention centers or group homes. By targeting these teens and doing STD testing, more high risk adolescents are being identified and provided an intensive sexual risk reduction prevention intervention.

Another program within the project focuses on incarcerated 18-24 year-olds. This group consists of young people who are tried as adults and convicted of crimes. Rather than use educational tools designed for an older age group, a unique intervention model is being implemented using younger, peer educators with histories of incarceration and/or HIV infection.

Successful collaboration between the New York Department of Correctional Services and project staff has resulted in a significant rise in the amount of voluntary testing in one facility receiving additional services from project funds. The frequency of education and prevention counseling in that facility has been increased from once every other week to four times a week, and outside staff providing the intervention report feeling a "new sense of belonging" according to Barbara Devore, Director of CBO Services.

The need to provide information in Spanish to a large incarcerated Hispanic population in New York prompted the team to seek additional funds for Spanish-speaking services to inmates. The written curriculum for peer educators has now been translated into Spanish and Spanish-speaking or bilingual peer educators are regularly utilized.

According to Dan, the biggest single challenge for the project has been meeting the needs of the diverse segments of the criminal justice population: "Within that, you have immigrants, substance abusers, younger prisoners, women and men and an

continued on page 5

continued from page 4
upstate prison population that is released to New York City. You can't stereotype inmates, or dump them into one category. It is a complicated beast, and it is hard, sometimes, to stay focused." Barbara adds: "The set of priorities we have is different from that of the prison system. They are concerned about security and rehabilitation, whereas our primary concern is public health. It is a constant dance, with public health not being their first priority. We have to

remember that we are a guest in their house." Asked if he could change one thing about the project or the proposal, Dan said: "If we had one wish, it would be for more money from the federal government to support the demonstration projects. We have been able to do what we have done because we already had money, and a program that was already well-established. The program has excellent potential. We just want to make sure that we can keep it going."

Professional Corner

Professional Corner

Snapshot of: Dan O'Connell

Academia's loss was public health's gain when Dan O'Connell took a summer job at the New York State Health Department in 1987. After receiving both a Masters Degree in English and a Masters Degree in Library Science, Dan completed his coursework for a Doctor of Arts in English Literature at the State University of New York in Albany. Steeped in the world of James Joyce, his favorite author and the focus of his doctoral study, a summer session lull led Dan to take a job with the then-new AIDS Drug Assistance Program in New York. Dan was the first person hired by the program, and the rest is history. Lured by the immediate rewards of working in the public health sector, the freshman English students at SUNY, Albany, lost their instructor, and Dan found a new career.

Since his first job with ADAP, Dan has moved through a variety of positions in public health. As current Project Director and primary author of the New York State CDC/HRSA Corrections Demonstration Grant, Dan is responsible for directing a large, complex and extremely innovative program.

Dan's experience with corrections came during his initial involvement in the ADAP program. Early in his career,

Dan worked on providing parolees access to HIV medications upon release. Over the years, Dan has worked on a number of program initiatives, though his responsibilities have become increasingly administrative. Today, he is Associate Director of Health's AIDS Institute.

It is important to Dan that he keeps in touch with the human side of the projects he administers. The definition for AIDS at that time was more restrictive than it is now and it was difficult to get medications for people who were sometimes in desperate need but not eligible for assistance. One particularly memorable call for Dan was from the parents of a young boy with hemophilia who was HIV positive. Before they were able to get medications for him, the boy died. Through programmatic site visits and his involvement with the Community Planning Group, Dan still keeps in touch with the provider/client base. When asked what the most satisfying part of his job is, Dan replied: "Day in and day out, I know what we're doing is good and right."

Perhaps it is no surprise that, when asked to name his favorite book, the Associate Director of one of the biggest, most complicated HIV programs in the country chose for casual reading what many students of literature consider the densest, most difficult book in the English language: *Ulysses*, by James Joyce.
-Marjorie Dunne

NATIONAL MINORITY AIDS COUNCIL

NEWS

Site Visits

With site visits completed in five CBOs in three different states, Carlos Arboleda, Ellen Bentz and Teresa Brown are busy developing targeted assistance plans.

Needs Assessment

Every CBO completes a needs assessment prior to the site visit. The assessment provides background information on the role of the CBO, the extent of the organization's experience, and self-identified needs. Ellen then makes a site visit which lasts from one hour to several hours. After each visit, Ellen creates a technical assistance plan and submits it to the CBO for approval. The plan includes short-term goals, long-term goals and a timeline.

Each state has a unique program planned for delivering services and the CBOs involved represent a wide range of experience with the correctional system. Identified needs are varied, from educational materials on mental health, information on Medicaid/ADAP linkage programs, assistance with seeking funding for video production, educational resources for juveniles, and trainings on creating Medicaid and ADAP linkage programs.

Projects

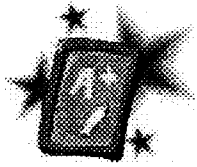
The materials developed for individual CBOs will be available for use by all CBOs, both those involved in the project and those in the general community. The first product of the project is entitled "Lessons Learned from the Inside: A Guide for Starting Community Based Programs in Correctional Facilities". This booklet will be available in October 2000, and will be sent to all those involved in the CDC Demonstration Projects.

Evaluation and Program Support Center

Emory University and Abt Associates

The Evaluation and Program Support Center (EPSC) has been awarded the responsibility of implementing a multi-site evaluation of seven state grantees who have been funded to improve services to HIV+ inmates and those who are at risk for contracting HIV/AIDS. Utilizing a matrix evaluation approach, each grantee submits a combination of aggregate and client-level data that reflect services that are delivered within the domains of case management/discharge planning/HIV treatment, HIV prevention, disease screening and staff training. Over the past year, the EPSC has been working diligently on developing and finalizing data collection forms (of which there are 10) so that the evaluation may reach a stage of full implementation. The first quarterly data collection forms, which capture aggregate data for services rendered between April 1 and June 20, 2000, were due to the EPSC by July 31, 2000. The baseline and follow-up interviews are currently being translated into Spanish; it is expected that grantees will begin collecting client-level data by mid-September.

During the next fiscal year, the EPSC will develop data collection protocols that detail sampling, data collection instruments, data collection and quality control procedures, procedures for submission of data to the repository, and other topics. The EPSC will also manage and monitor the quality of the data that are collected, continue to provide technical assistance and training for the grantees to ensure that the forms are completed accurately and consistently, support the grantees and provide technical assistance in the collection of qualitative data, build a data repository and conduct data analysis. Aspects of the technical assistance will be discussed at the biannual grantee meetings, the next of which is scheduled to occur January 17-19, 2001 in San Francisco, California.



Technical Assistance Update from CTAT (Correctional Technical Assistance and Training) Project

Technical Assistance

We are pleased to announce that CTAT has been hard at work. Actual trainings have been conducted and/or coordinated by CTAT staff for Florida and Georgia; additional trainings for these states are underway. There are also planned trainings and other TA request fulfillments for California, Illinois, New Jersey, Massachusetts and New York.

Training

While CTAT has provided trainings to corrections personnel in Georgia prisons for the past five years, we are excited to expand our technical assistance and trainings to jails, juvenile justice providers, public health professionals, Ryan White Title II healthcare providers and grantees, probation pardons and parole officers through the HRSA/CDC Initiative. There are *two training highlights worth noting*:

❖ Occupational Exposure to TB, HIV and Hepatitis B and C

This training provides an excellent entrée into corrections facilities and is presented in layman's terms to a wide range of corrections audiences (staff from medical, safety, personnel, etc.). Traditionally, this training is presented in combination with an on-site needs assessment. Audiences are educated about each disease, presented facts about their risks for transmission and what they can do to protect themselves in case of an exposure. The needs assessment provides an easy, informal mechanism to determine the future training needs of a specific audience or facility, paving the way for future collaborations.

❖ Involving Probation and Parole Officers in Continuity of Care: Infectious Disease Mental Health

Formal HIV training of probation and parole officers has been traditionally overshadowed by the prevailing need to train and educate health care providers who treat and manage the disease. However, correctional officers not only play an integral role in the management and care of incarcerated persons, but also in the pre and post-release care of inmates and incarcerated juveniles. As such, this training has been an excellent tool by which to provide specialized training for correctional officers and to bring their level of knowledge and integration of skills up to speed.

Please contact any of the following staff with questions/comments:

Dr. Jacqueline Zalumas, Project Director; Vara DeLoney, Clinical Instructor and Project Coordinator; Marjorie Dunn, Clinical Instructor; Johnetta Holcombe, Training Coordinator. Additionally, two graduate students provide invaluable assistance with data collection, analysis and evaluation.

November 12-16, 2000

American Public Health Assoc.
Annual Conference, Boston, MA
For more info: 202-777-APHA or
www.apha.org/meetings

January 22-24, 2001

American Correctional Association
Winter Conference, Nashville, TN
For more info: 1-800-222-5646
www.corrections.com/aca/conferences.html

Save the Date

January 17-19, 2001

CDC/HRSA Grantee Meeting
San Francisco, CA

March 15-18, 2001

American Correction Health Services
Multidisciplinary training conference
Atlanta, GA
For more info: 1-877-918-1842 or
www.corrections.com/achsa/conferences.html

RESOURCES



This month's featured source: Cell Wars by Bristol Meyers Squibb

Bristol Meyers Squibb has developed several HIV educational tools specifically for inmates that explain HIV and encourage inmates to get tested. The materials include two comic books, Cell Wars (for male inmates) and A Sister's Story (for female inmates), a movie and a large Cell Wars poster. All materials are **FREE**, available in English and Spanish and may be ordered in bulk. **CONTACT:** The BMSI Corrections Key Account Manager for your state at 1-800-492-7016 and the appropriate extension as indicated below:

GA: Jan Helton (x1116); **CA:** Raymond Greenberg (x1117); **NY:** Hector Ortega (x1057); **NY:** Catherine Desimone (x1247); **MA:** Rhorian Moss (x1306); **FL:** Abdullah Canligil (x1054); **NJ:** Steve Hopkins (x1236); **IL:** Lisa Shrimp (x1103)

Additional Resources:

National Criminal Justice Research Service (NCJRS) www.ncjrs.org: serves as the national clearinghouse for the exchange of criminal justice information. This site features documents, statistical information, links to corrections-oriented websites and more regarding adult and juvenile offenders. Five reports on offender reintegration back into the community and education programs across the country can be downloaded at the site (www.ncjrs.org/corrdocs.html):

- Chicago's Safer Foundation: A Road Back for Ex-Offenders (1998)
NCJ Number – 167575
- Successful Job Placement for Ex-Offenders: The Center for Development Opportunities (1998)
NCJ Number – 168102
- The Orange County, Florida, Jail Education and Vocational Programs (1997)
NCJ Number – 166820
- Texas Project RIO (Re-integration of Offenders) (1998)
NCJ Number – 168637
- The Delaware Department of Correction Life Skills Program (1998)
NCJ Number - 169589

FREE copies of these publications can also be obtained by:

Writing – National Criminal Justice Reference Services, P.O. Box 6000, Rockville, MD 20849

Calling - 1-800-851-3420

Email - askncjrs@ncjrs.org